

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3	/					
4		/				
5		/				
6		/				
7		/				
8		/				
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50						
TOTAL IND.	2		↓		↓	↓
TOTAL DEP.	16	↓		↓		↓
TOTAL CLAIMS	18	↓	↓	↓	↓	↓

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.			↓		↓	↓
TOTAL CLAIMS			↓		↓	↓

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS